



VA RECORDS CENTER AND VAULT (RC&V) REFERENCE REQUEST

NOTE: Use a separate form for each request.

TO VA Records Center and Vault (RC&V)	ACCESSION NO.	BOX NUMBER
	NAME OF NARA FACILITY THAT TRANSFERRED RECORDS TO THE VARC&V (if this accession was previously stored by NARA)	

DESCRIPTION OF RECORD(S) OR INFORMATION REQUESTED

REMARKS

NATURE OF SERVICE

☐ FURNISH COPY OF RECORD(S) ONLY ☐ PERMANENT WITHDRAWAL ☐ TEMPORARY LOAN OF RECORD(S) ☐ REVIEW ☐ OTHER (Specify)

NAME OF REQUESTER

COMMERCIAL TELEPHONE NO. (Include Area Code) DATE

TRANSFERRING FACILITY OFFICIAL (Signature and title)

DATE

NAME AND ADDRESS OF OFFICE/AGENCY (Include street address, building, room no. and ZIP Code)

FOR USE BY RC&V

☐ RECORDS DESTROYED

REMARKS

☐ RECORDS NOT IN RC&V CUSTODY☐ WRONG BOX NUMBER -- PLEASE RECHECK☐ ADDITIONAL INFORMATION REQUIRED TO IDENTIFY RECORDS REQUESTED☐ MISSING (Neither record(s) or information found in container(s) specified)☐ RECORDS PREVIOUSLY CHARGED OUT TO (Name, office/agency and date):

DATE

SERVICE PERFORMED

TIME
REQUIREDSEARCHER'S
INITIALS